SEP 25 AUG

SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

TEMPORARY FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB Number: 3235-0076 Expires: March 16, 2009 Estimated Average burden hours per response 16.00

SEC	USE	ONLY
Prefix		Seria

DATE RECEIVED

Name of Offering (: check if this is an amendme	ent and name has changed, and indicate change.)	
Series B Preferred Stock	ent and name has changed, and moreate change.)	
Filing Under (Check box(es) that apply): : Rule 50 Type of Filing: XX: New Filing : // Am	04: Rule 505 XX Rule 506 : Sectionendment	ion 4(6) : ULOE '
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (: check if this is an amendme WeBook Inc.	ent and name has changed, and indicate change.)	08060395
	r and Street, City, State, Zip Code)	Теперионе гонное уменьно.
3 Bethesda Metro Center, Mezz 02	20B, Bethesda, Maryland 20814	301-986-9060
Address of Principal Business Operations (Number (if different from Executive Offices)	r and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business On-Line Book Publishing		PROCESSED
Type of Business Organization		
: X corporation : business trust	: limited partnership, already formed : limited partnership, to be formed	: other (please specify): OCT 0 72008
		THOMSON REUT
	Month Year	٦ - ا
Actual or Estimated Date of Incorporation or Organization: (E	nization: O 1 O 7 Enter two-letter U.S. Postal Service Abbreviation CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS Federal: 11/20 Must File: All issuers making an offering of sec 77d(6).		O or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
	e it is received by the SEC at the address given below	A notice is deemed filed with the U.S. Securities and or, if received at that address after the date on which it
Where to File: U.S. Securities and Exchange Commission	sion, 100 F Street, N.E., Washington, D.C. 20549.	
Copies Required: Two (2) copies of this notice mus photocopies of the manually signed copy or bear typed		ally signed. Any copies not manually signed must be
Information Required: A new filing must contain all thereto, the information requested in Part C, and any not be filed with the SEC.	ll information requested. Amendments need only rep material changes from the information previously supp	port the name of the issuer and offering, any changes plied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.		
and that have adopted this form. Issuers relying on U	LOE must file a separate notice with the Securities Ad s a precondition to the claim for the exemption, a fee i	s of securities in those states that have adopted ULOE Iministrator in each state where sales are to be, or have in the proper amount shall accompany this form. This itutes a part of this notice and must be completed.
	ATTENTION	
Failure to file notice in the appropriate states wi notice will not result in a loss of an available stat		

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity
securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers;
and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: X Promoter X Beneficial Owner X Executive Officer X Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Itai Kohavi
ACMI ANDIMATA
Business or Residence Address (Number and Street, City, State, Zip Code)
business of Residence Address (Number and Street, City, State, Zip Code)
c/o Itai Kohavi, 6a Granit Street, Hod Hasharon, 45502, Israel
Check Box(es) that Apply: [] Promoter [] Beneficial Owner X Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Sue Heilbronner
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o WeBook Inc., 3 Bethesda Metro Center, Mezz 020B, Bethesda, Maryland 20814
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer X Director [] General and/or Managing Partner
Full Name (Lost name Cost (Cir. 4) (d. 1)
Full Name (Last name first, if individual)
Ehud Levy
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Novadent Ltd., 1 HaShikma St., Savion (POB 89), Israel
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer X Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Moshe Mor
·
Business or Residence Address (Number and Street, City, State, Zip Code)
· · · · · · · · · · · · · · · · · · ·
c/o Greylock Israel Limited Partnership, 10 Abba Eban Blvd., Building C, 9th floor, POB 12298,
·
Herzliya Pituach 46733, Israel
Check Box(es) that Apply: [] Promoter :X Beneficial Owner [] Executive Officer X Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Vertex III Fund (through the following Vertex entities: Vertex III (Israel) Fund L.P.; Vertex III (Israel
B) Fund L.P.; Vertex III (DCM) Fund L.P.; Vertex III (C.I.) Fund L.P.; Vertex III (C.I.) (G) Fund
L.P.; and Quest for Growth NV)

Business or Residence Address (Number and Street, City, State, Zip Code) c/o Novadent Ltd., 1 HaShikma St., Savion (POB 89), Israel
Check Box(es) that Apply: [] Promoter :X Beneficial Owner [] Executive Officer X Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Greylock Israel Limited Partnership
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Greylock Israel Limited Partnership, 10 Abba Eban Blvd., Building C, 9th floor, POB 12298, Herzliya Pituach 46733, Israel

				В.	INFORM	ATION AB	OUT OFFEI	RING		•		
-											Yes	No
1.	Has the issu		does the issue Ilso in Appen					nis offering?			;	: X
2.	What is the	minimum i	nvestment tha	at will be ac	cepted fro	m any indivi	dual?	•••••••••			\$N/	<u> </u>
3.	Does the of	fering perm	it joint owner	ship of a si	ngle unit?	••••••		•••••	•••••••		Yes	No
4.	If a person or states, libroker or d	n or similar to be listed st the name ealer, you m	remuneration is an associate of the broker ay set forth the	for solicitated person of dealer.	ation of pu or agent of If more tha	rchasers in c a broker or c in five (5) pe	onnection wi dealer registe rsons to be li	or given, dire th sales of se red with the S sted are assoc	curities in th SEC and/or v	e offering.	:X	:
Full	Name (Last	name first, i	f individual)									
Busi	ness or Resid	lence Addre	ss (Number a	nd Street, (City, State,	Zip Code)						
Nam	e of Associa	ted Broker o	r Dealer									
			d Has Solicite							, .	н с	
(Che		es" or check [AZ]	indivídual St [AR]	ates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	:A [GA]	III States [HI]	[ID]
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RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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Full	Name (Last	name first,	if individual									
	•		if individual)								
Busi	•	lence Addre	ss (Number a)								
Busi Nam State	ness or Reside of Associates in Which F	lence Addre	ss (Number a or Dealer I Has Solicite	nd Street, C	City, State,	Zip Code)					Il States	
Busi Nam State (Che	ness or Reside of Associates in Which Fick "All State	lence Addre	ss (Number a or Dealer I Has Solicite	nd Street, C	City, State,	Zip Code)		[DC]	[FL]		Il States [H1]	[ID]
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Nam Nam State (Che AL) IL] MT RI] Full 1 Susin	e of Associate of Associate in Which Fick "All State [AK] [IN] [NE] [SC] Name (Last rates or Residue of Associate in Which Fick "All State [AK] [IN]	lence Addre	ss (Number a or Dealer I Has Solicite individual St. [AR] [KS] [NH] [TN] individual) ss (Number a r Dealer I Has Solicite individual St. [AR]	d or Intendates)	Eity, State, [CO] [LA] [NM] [UT] Eity, State,	Zip Code) Purchasers [CT] [ME] [NY] [VT] Zip Code) Purchasers	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] [WV]		[HI] [MS] [OR] [WY]	[MO] [PA] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 0 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Туре	e of Security	Aggregate Offering Price	Amount Already Sold
Debi		\$	\$
Equi	·		\$3,015,000
	:[] Common : [X] Preferred	\$ <u>3,015,000</u>	33,013,000
Con	vertible Securities (including warrants)	C2 015 000	62.015.000
Parti	nership Interests	\$3,015,000	\$3,015,000
Othe	r (Specify)	3	\$
		S	\$
Tota 2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	\$3,015,000	\$ <u>3,015,000</u>
		Number Investors	Aggregate Dollar Amount of Purchases
Ассг	edited Investors	<u> 10'</u>	\$ <u>3,015,000</u>
Non-	Accredited Investors		\$
Tota	l (for filings under Rule 504 only)		\$
3.	If this filing is an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	Type of	Dollar Amount
		Security	Sold
Rule	505		\$
Regu	lation A		\$
Rule	504		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Tran	sfer Agent's Fees	<u>'</u>	\$
Print	ing and Engraving Costs		\$
	l Fees	[X]	\$70 <u>,000</u>
-	unting Fees	(- <i>1</i>	<u></u>
	-	•	Ф
	Commission (specify finders' fees separately)	:	\$
Othe	r Expenses (identify)	:	S
To	otal	IXI	\$70,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total Payments Listed (column totals added)		:	\$2,9	45 <u>,000</u>
Column Totals	:	\$:	\$ <u>2,945,000</u>
	:	\$;	\$ <u>2,945,000</u>
developments, capital expenditures and working capital	:	\$:	\$
Other (specify): For general corporate purposes, including research and		<u>————</u>		
Working capital	:	\$:	\$
Repayment of indebtedness	. :	\$:	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	:	\$:	\$
Construction or leasing of plant buildings and facilities	:	\$:	\$
Purchase, rental or leasing and installation of machinery and equipment	:	\$:	\$
Purchase of real estate	:	\$:	\$
Salaries and fees	:	\$:	\$
		Payments to Officers, Directors, and Affiliates		Payments to Others
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.				
b. Enter the difference between the aggregate offering price given in response to Part C- Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	•		\$ <u>2.</u>	945,000

	D. FEDERAL SIGNATURE	
following signature constitutes an underta	be signed by the undersigned duly authorized per king by the issuer to furnish to the U.S. Securitioned by the issuer to any non-accredited investor	es and Exchange Commission, upon written
Issuer (Print or Type)	Signature	Date
WeBook Inc.	(jm	September 22, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	<u> </u>
Itai Kohavi	Chairman of the Board of D	irectors & Chief Executive Officer
	——— ATTENTION ————	
Intentional misstatements o	r omissions of fact constitute federal criminal	violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262(c), (d), (e) or (f) presently subject to any of the disqualification	Yes	No
	provisions of such rule?	:	:
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) WeBook Inc.	Signature	Date September 22, 2008
Name (Print or Type)	Title (Print or Type)	<u>`</u>
Itai Kohavi	Chairman of the Board of Dir	ectors & Chief Executive Officer

